UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 8 10 2 Serial/Patent # 10 053236					
3 Please refund the following fee(s):		4 PAPER 5 DATE NUMBER FILE		5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment				\$
	Extension of Time				\$
	Notice of Appeal/Appeal				\$
L	Petition				\$ /30
	Issue				\$
	Cert of Correction/Terminal Disc.				\$
	Maintenance		•		\$
	Assignment				\$
	Other				\$
		7 TOTAL AMOUNT OF REFUND \$			\$
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment	-	C	redit Der	oosit A/C #:
	Duplicate Payment		9		
	No Fee Due (Explanation):	<u></u>			
Office Misplandors.					
8 1'					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: 6/L/SP TITLE: OR ANY					
SIGNATURE: PHONE: 305-9199					
office:					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: Wester Kelly DATE: 8/13-02					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B